## PATENT ATTORNEY DOCKET NO. 01948/101002

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:

Li et al.

Confirmation No.:

1967

Serial No.:

10/575.127

Art Unit:

1636

§ 371(c) Date:

June 11, 2007

Examiner:

Jennifer Ann Dunston

Customer No.:

21559

Title:

METHODS AND COMPOSITIONS FOR TREATING CONDITIONS

INVOLVING ABNORMAL ANGIOGENESIS

## REPLY TO NOTICE OF ALLOWANCE AND NOTICE OF ALLOWABILITY

In reply to the Notice of Allowance that was mailed in connection with the abovecaptioned application on August 6, 2010, and having confirmation number 1967, and the Notice of Allowability that was mailed on August 6, 2010, submitted herewith is a completed fee transmittal form PTOL-85. The form PTOL-85 has been amended to show Jian Li as the first named inventor in view of the Petition Decision dated September 28, 2010, in which Applicants' request to change the order of the listed inventors was granted.

Applicants hereby authorize the Office to deduct the amount of \$1055.00 from Deposit Account No. 03-2095 to cover the fee of \$755.00 required by 37 C.F.R. § 1.18(a) and the publication fee of \$300.00.

Applicants submit that all requirements for allowance of this application have been met.

If there are any other charges or any credits, please apply them to Deposit Account No. 03-2095.

Date: November 4, 2010

Respectfully subpaitted,

Kristina/Bicker-Brady, Ph.D.

Clark & Elbing LLP 101 Federal Street Boston, MA 02110

Telephone: 617-428-0200 Facsimile: 617-428-7045

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A	TTORNEY DOCKET NO	CONFIRMATION NO.
10/575,127 ITTLE OF INVENTION	06/11/2007 : METHODS AND CO	MPOSITIONS FOR TRE	ATING CONDITIONS IN		01948/101002 MAL ANGIOGENESIS	1967
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	11/08/2010
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
DUNSTON, JE	NNIFER ANN	1636	424-093210			i.e.
Address form PTO/SI  "Fee Address" ind. PTO/SB/47; Rev 03-0 Number is required.  B. ASSIGNEE NAME A. PLEASE NOTE: Unit recordation as set ford  (A) NAME OF ASSIGNEE DEATH (A) NAME OF ASSIGNEE DEATH (B) PROPERTY (B	ication (or "Fee Address" 2 or more recent) attach  ND RESIDENCE DATA  ess an assignee is ident  at in 37 CFR 3.11. Comp  NNEE  eaconess Medical	Indication form ed. Use of a Customer  TO BE PRINTED ON fied betow, no assignee letton of this form is NO	(1) the names of up to or agents OR, alternaint (2) the name of a single registored attorney or a 2 registered patent attorney or the state, or an amount of the patent of	rely, efform (having as a m gent) and the names meys or agents. If no printed.  e)  tent. If an assignee assignment.  and STATE OR COU husetts	ember a 2 Kristina B of up to name s 3 Todd Arm  s identified below, the d UNTRY)	ieker-Brady, Ph.D. ustrong, Ph.D.
a. The following fee(s) s  Issue Fee  Publication Fee (N  Advance Order - #	o small entity discount p of Copies	ermitted)	D. Payment of Fec(s): (Pless A check is enclosed. Payment by credit can Mithe Director is hereby overpayment, to Depo	se first reapply any p f. Form PTO-2038 is authorized to charge in Account Number	artached the required fee(s), any de 23-2095 (enclose a)	shown above) ficiency, or credit any n extra copy of this form
OTE: The Issue Fee and	SMALL ENTITY statu		h. Applicant is no long	er claiming SMALL	ENTITY status. See 37 CE	R 1.27(g)(2).

Date Novamber 4, 2010 Authorized Signati

Typed or printed name Kristina Bieker-Brady, Ph.D Registration No. 39,109 This collection of information is required by 37 CFR.1311. The information is required to obtain or retain a benefit by the policy which is to file (and by the USPTO to process) an application: Confidentiality is governed by 38 U.S.C. 122 and U.F.R.1 14. This collection is estimated to take 12 minutes in complete, including galacteria, prayening, and obtaining the complete application from the USPTO. There will vary depositing the completed application from the USPTO. There will vary depositing upon the inglivation cale. Any comments on the amount of in the policy or require to complete to complete to the complete of the complete

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